



# ST MARY ABBOTS Parish Church

Parish Office, St Mary Abbots Centre, Vicarage Gate, London W8 4HN  
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## CHILDREN ON SUNDAYS REGISTRATION FORM

Today's Date			
Full Names of Parents or Carers (First Name listed will be recorded as primary contact)		Mobile Phone Number (EMERGENCY USE )	Email Address
1			
2			
Family Contact Address			
Post Code		Landline No	
DETAILS OF CHILD(REN)			
Full Name	Date of Birth	Any relevant medical conditions (Allergies, asthma etc)	
1			
2			
3			
4			
Signature			

In accordance with data protection legislation this information will only be used for the ministry and activities of St Mary Abbots Church, W8.

**PLEASE RETURN THIS COMPLETED FORM TO FATHER GARETH C/O ST MARY ABBOTS VESTRY**